

TEST NUMBER

U.S. **UTILITY** Patent Application

<p>O.I.P.E.</p> <p>SCANNED <u>TRI</u> Q.A. <u>1</u></p>	<p>PATENT DATE</p>
---	--------------------

APPLICATION NO. 09/843413	CONT/PRIOR D	CLASS 005	SUBCLASS 644	ART UNIT 3628 3673	EXAMINER GROSS2 H0
------------------------------	-----------------	--------------	-----------------	-------------------------------------	-----------------------

APPLICANTS

Tony Pearce

FILE

Contourable inflatable orthopedic pillow

Best Available Copy

PTO-2040
12/89[illegible]

<input type="checkbox"/> TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed. <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____ _____ _____	_____ (Assistant Examiner) (Date)			NOTICE OF ALLOWANCE MAILED	
	_____ (Primary Examiner) (Date) _____ (Legal Instruments Examiner) (Date)			ISSUE FEE	
Amount Due				Date Paid	
<input type="checkbox"/> The terminal ____months of this patent have been disclaimed.				ISSUE BATCH NUMBER	
WARNING: The information disclosed herein may be restricted. Unauthorized disclosure may be prohibited by the United States Code Title 35, Sections 122, 181 and 368. Possession outside the U.S. Patent & Trademark Office is restricted to authorized employees and contractors only.					

Form PTO-436A
(Rev. 6/99)

FILED WITH: ☐ DISK (CRF) ☐ FICHE ☐ CD-ROM
(Attached in pocket on right inside flap)

(FACE)